ENT Examination Referral Letter

From:

Dr. John Smith ENT Specialist 123 Audiology Lane City, State, ZIP

Phone: (123) 456-7890

Email: drjohnsmith@example.com

Date: [Insert Date]

To:

Dr. Sarah Johnson [Specialist's Title] 456 Specialist Avenue City, State, ZIP

Dear Dr. Johnson,

I am writing to refer my patient, [Patient's Name], for further evaluation and management of their condition. During the recent ENT examination on [Examination Date], the patient presented with the following symptoms:

- [Symptom 1]
- [Symptom 2]
- [Symptom 3]

Given the persistence and severity of these symptoms, I believe your expertise in [Specialist's Area of Expertise] would be beneficial.

The patient's medical history includes:

- [Relevant Medical History]
- [Medication List]
- [Allergies]

Please find attached any necessary documentation, including recent test results and imaging studies.

Thank you for your attention to this matter. I look forward to your evaluation and recommendations for [Patient's Name].

Sincerely, Dr. John Smith ENT Specialist